

## **Green Mountain Care Board Member Job Description**

### **Overview**

Vermont's landmark health care health reform law sets out a process to move the state through several stages of health care system change leading to a publicly financed, universal health benefits program, Green Mountain Care, by 2017, or earlier with Federal waivers. When completed, the program will provide affordable access to high quality health care for all Vermonters, separate from their employment.

### **Green Mountain Care Board**

The law establishes an independent, five-member, Green Mountain Care Board to approve the design and implementation of Green Mountain Care and to create a cost-containment system for health care. The Board consists of a full-time Chair and four members. The Chair shall be responsible for leading the process. This includes developing a collaborative environment, assuring thoughtful and informed deliberations, excellent communication and administrative efficiency. The Chair supervises the staff.

### **Responsibilities of the Board**

The responsibilities of the Board are set forth fully at Act 48, 2011 Session, and should be reviewed for a complete understanding of the Board's duties, but some duties are summarized briefly below.

The Board is responsible for controlling the growth of health care costs by revamping the way doctors and hospitals get paid.

The Board's oversight responsibilities include reviewing a health information technology plan, a health care workforce development plan and a resource allocation plan. The Board will set rates for health care professionals. The Board will also have the final approval for insurance rate requests, hospital budgets and capital projects requiring certificates of need.

The Board will adopt a benefit package providing Vermont residents timely, high quality health care from the provider of their choice.

The Board will establish an advisory committee of patients, consumers and health care professionals; approve insurance rate increases, review payment reform pilot projects recommended by the Department of Vermont Health Access, develop cost-containment mechanisms, and develop a process for rate-setting for health care providers. The

Board will submit a work plan to the Legislature and make recommendations to the Legislature about changes to current rules relating to managed-care organizations in order to ensure the rules fit with payment reform pilots.

### **Principles**

Candidates must be committed to the principles outlined in the law:

- The State of Vermont must ensure universal access to and coverage for high-quality, medically necessary health services for all Vermonters.
- Overall health care costs must be contained and growth in health care spending must balance the health needs of the population with the ability to pay for such care.
- The health care system must be transparent in design, efficient in operation, and accountable to the people it serves.
- Primary care must be preserved and enhanced so that Vermonters have care available to them preferably within their own communities.
- Every Vermonter should be able to choose his or her health care provider.
- Vermonters should be aware of the costs of health services. Costs should be transparent and easy to understand.
- Individuals have a personal responsibility to maintain their own health and to use health resources wisely.
- The health care system must recognize the primacy of the relationship between patients and their health care practitioners.
- Vermont's health delivery system must seek continuous improvement of health care quality, safety and promote and incent healthy lifestyles.
- Vermont's health care system must include mechanisms for containing all system costs and eliminating unnecessary expenditures.
- The financing of health care must be sufficient, fair, predictable, transparent, sustainable, and shared equitably.
- The system must consider the effects of payment reform on individuals and on health care professionals and suppliers.
- Vermont's health care system must operate as a partnership between consumers, employers, health care professionals, hospitals and government.

### **Qualifications**

Candidates must have the following qualifications, as outlined in the law:

- Commitment to the principles expressed in the law;
- Knowledge of or expertise in health care policy, health care delivery, or health care financing, and openness to alternative approaches to health care; and

- Possession of desirable personal characteristics, including integrity, impartiality, health, empathy, experience, diligence, neutrality, administrative and communication skills, social consciousness, public service, and regard for the public good.

These qualifications will be evaluated with an eye towards the candidate's knowledge of financial statements and budgets, health care policy at the national and state level, understanding of quantitative methods and ability to oversee complex research and evaluation. It is expected that the expertise, knowledge and characteristics of individual members will complement each other and that members contribute to public confidence in the Board's decisions and process.

### **Compensation**

Board members will be exempt state employees. The chair will be a full time employee and will be paid \$122,866. Side members will be .8 FTE (32 hours) and will be paid \$81,910. All members are entitled to standard medical benefits provided to state employees. Side members may have outside work, although all members must comply with conflict of interest and recusal requirements discussed below.

Board members may not serve as an officer, director, consultant or attorney for an entity regulated by the Board. Board members may practice medicine and be a non-management employee of a hospital or other health care facility, but would be required to recuse themselves from any Board matters which involve their employer. Candidates need not resign these positions prior to accepting a position.

### **Appointment Process**

The Governor makes appointments to the Green Mountain Care Board from a list of qualified candidates submitted to him by the Nominating Committee. The Nominating Committee consists of nine members, appointed by the Speaker of the House, Senate President Pro Tempore and Governor to identify candidates for these positions. Appointments by the Governor to the Green Mountain Care Board are subject to confirmation by the Senate. The application process is confidential.